Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District of ILLINOIS (State)		
Case Number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. You	r full name		
gove ident	e the name that is on your ernment-issued picture tification (for example, driver's license or	Michaela First name	First name
,	sport).	Middle name	Middle name
Bring	g your picture	Mills	
ident	tification to your meeting the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All c	other names you		
have year	e used in the last 8 rs	First name	First name
	ide your married or den names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
you	y the last 4 digits of r Social Security	xxx - xx2732	XXX - XX
Indiv	ber or federal vidual Taxpayer tification number	OR	OR
		9xx - xx	9xx - xx

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Document Mills

Page 2 of 66

Case Number (if known)

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in Business name Business name the last 8 years Include trade names and Business name Business name doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 6321 N. Oakley Ave. Number Street Number Street Unit Chicago IL 60659 City State ZIP Code City ZIP Code COOK County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send the one above, fill it in here. Note that the court any notices to you at this mailing address. will send any notices this mailing address. 1751 D West Howard St 1751 D West Howard St Number Street Number Street Unit 220 Unit 220 P.O. Box P.O. Box Chicago 60626 Chicago 60626 ZIP Code City State City State ZIP Code Check one: Check one: Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy. I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. have another reason. Explain. I have another reason. Explain. See 28 U.S.C. § 1408 (See 28 U.S.C. § 1408

Michaela

Debtor 1

Case 17-36395 Filed 12/07/17 Doc 1

Last Name

Entered 12/07/17 15:34:36 Page 3 of 66

Desc Main

Document Michaela Debtor 1 Case Number (if known)

Pa	Tell the Court About You	r Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you				equired by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box.			
	are choosing to file under	■ Chap	oter 7					
		☐ Chapter 11						
		☐ Chap	☐ Chapter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	local yours subm with a linear Application of the linear subm with a l	court for more detained, you may pay with a pre-printed address detailed to pay the fee in its feation for Individuals are that my fee be well as you and you also well as you a judge may, but than 150% of the off he fee in installment	Is about how you may th cash, cashier's che on your behalf, your as. Installments. If you che to Pay The Filing Fewaived (You may requise not required to, waiting poverty line that as.). If you choose this	Please check with the clerk's office in your pay. Typically, if you are paying the fee ck, or money order. If your attorney is attorney may pay with a credit card or check choose this option, sign and attach the e in Installments (Official Form 103A). The est this option only if you are filing for Chapter 7. The ye your fee, and may do so only if your income is applies to your family size and you are unable to option, you must fill out the Application to Have the BB) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No	District None	When	Case Number			
			District None	When	MM / DD / YYYY Case Number			
					MM / DD / YYYY			
			District	When	Case Number			
					MM / DD / YYYY			
10.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No	Debtor		Relationship to you			
	not filing this case with you, or by a business parter, or by affiliate?		District	When _	Case Number, if known			
					Relationship to you			
			District	When _	Case Number, if known			
11.	Do you rent your residence?	□ No. ■ Yes.	Go to line 12 Has your landlord ob	tained an eviction judgm	ent against you?			
	Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.							

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 De

Michaela Document Mills

Debtor 1

Entered 12/07/17 15:34:36 Desc Main Page 4 of 66

Case Number (if known)

	First Name	Middle Name	Last Name
Pa	Report About Any Busin	esses You Owi	ı as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.	■ No. □ Yes.	Go to Part 4. Name and location of business Name of business, if any Number Street
			City State Zip Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i> For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D).	appropria: balance si document No. I No. I Yes.	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set the deadlines. If you indicate that you are a small business debtor, you must attach your most recent heet, statement of operations, cash-flow statement, and federal income tax return or if any of these is do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). am not filing under Chapter 11. am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pa	Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	■ No.	What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street
			City State ZIP Code

Case 17-36395 Doc 1 Filed 12/07/17 Document

Entered 12/07/17 15:34:36 Desc Main Page 5 of 66

Debtor 1

Michaela

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	About D
You must check one:	You mu

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_ I ar	n not required	I to receive	a briefing	about
cre	dit counseling	because	of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-36395 Doc 1

Filed 12/07/17 Document

Entered 12/07/17 15:34:36 Page 6 of 66

Desc Main

Debtor 1

Michaela

Case Number (if known)

Pa	rt 6: Answer These Questions	for Reporting Purposes		
17.	What kind of debts do you have?	as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or invention of the line 16c. Yes. Go to line 17. 16c. State the type of debts you o	consumer debts? Consumer debts are deprimarily for a personal, family, or household business debts? Business debts are debt stment or through the operation of the business we that are not consumer debts or business	purpose." ts that you incurred to obtain ess or investment.
	Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		iapter 7. Go to line 18. er 7. Do you estimate that after any exempt is are paid that funds will be available to distri	
18.	How many creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion
Pa	rt 7: Sign Below			
For	you	correct. If I have chosen to file under Chap of title 11, United States Code. I ur under Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with I understand making a false statem	×	le, under Chapter 7, 11,12, or 13 pter, and I choose to proceed not an attorney to help me fill out 2(b). pecified in this petition. y or property by fraud in connection
		Executed on12/05/2017		uted onMM / DD / YYYY

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 7 of 66

Debtor 1 Michaela Mills Case Number (if known) ______

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

🗶 /s/ David Kosk	Date	Date:	12/07/20	017
Signature of Attorney for Debtor	Bute	MM / D	DD / YYYY	
David Kosk				
Printed name				
Geraci Law L.L.C.				
Firm name				
55 E. Monroe St., #3400				
Number Street				-
Chicago		6060	าว	-
Officago	16	0000	,0	
	State	ZII	P Code	
City 242 222 4800				ıcilaw.con
City				acilaw.con
City 242 222 4800				acilaw.con

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

			Joodinent	I dac o o
Fill in this in	formation to ident	ify your case:		
Debtor 1	Michaela		Mills	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of	_ <u>ILLINOIS</u> (State)	
Case Number (If known)	r			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1:	Summarize Your Assets	
		Your assets Value of what you own
	ole A/B: Property (Official Form 106A/B) by line 55, Total real estate, from <i>Schedule A/B</i>	<u> </u>
1b. Cop	by line 62, Total personal property, from <i>Schedule A/B</i>	\$ 5,097
1c. Cop	by line 63, Total of all property on <i>Schedule A/B</i>	\$ 5,097
Part 2:	Summarize Your Liabilities	
		Your liabilities Amount you owe
	le D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$2,305
3а. Сор	ble E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) by the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,000 \$190,453
Part 3:	Summarize Your Liabilities	
	le I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I	\$3,330.46

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 9 of 66

Debtor 1 Michaela Document Mills Pirst Name Middle Name Date Name Page 9 of 66

Case Number (if known) _

Part 4:	Answer These Questions for Administrative and Statistical Records						
_	6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes						
7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							
	B. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$3,855.78						
	e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : Part 4 of Schedule E/F, copy the following:	Total claim					
9a. Dom	nestic support obligations (Copy line 6a.)	\$_0.00					
9b. Taxe	es and certain other debts you owe the government. (Copy line 6b.)	\$_4,000.00					
9c. Clair	ns for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_0.00					
9d. Stud	lent loans. (Copy line 6f.)	\$_165,828.00					
	gations arising out of a separation agreement or divorce that you did not report as claims. (Copy line 6g.)	\$_0.00					
9f. Debt	ts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$_0.00					
9g. Tota	il. Add lines 9a through 9f.	\$_169,828.00					

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Fill in this in	formation to ide	ntify your case and this filin	g:	0 of 66			
Debtor 1	Michaela		Mills				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court fo	or the : <u>NORTHERN</u> District	of <u>ILLINOIS</u>				
Case Number			(State)			Chec	ck if this is an
(If known)						amer	nded filing
Official F	<u>orm 106A</u>	<u>/B</u>					
Schedul	e A/B: Pr	operty					12/15
ategory where esponsible for ages, write you out the control of th	you think it fits supplying correur name and cas Describe Each Reven or have any le	best. Be as complete and a	ccurate as possible. If two ne is needed, attach a separater every question. ther Real Esate You Own or Heart grown or Heart	d, or similar property?	both are equally		
	-	-			>		\$0.00
Part 2:	Describe Your Vel	nicles					
No. Yes. M A C 2 c 04. Watercraft	Describe Make: Model: Vear: Approximate Milea Other information: C006 Chrysler Too Over 108,000 mile	wn & Country with	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is comminstructions)	nly rs and another nunity property (see	Do not deduct securithe amount of any secureditors Who Have Current value of the entire property? \$ 1,09	ecured claims Claims Secu	s on Schedule D:
		ortion you own for all of yo	ur entries fro Part 2, includi	ing any entries for pages		Г	\$ 1,097.00
you have at	tached for Part 2	2. Write that number here		>			\$ 1,097.00
Part 3:	Describe Your Per	sonal and Household Items					
Do you own or	r have any legal	or equitable interest in any	of the following items?			portion	nt value of the n you own? deduct secured claims uptions
Examples:		i ishings urniture, linens, china, kitchenwa	re				
Yes.	Describe	Furniture, linens, small applianc	es, table & chairs, bedroom set		\$1,500		\$1,500. <u>0</u> 0

Michaela Case 17-36395 Filed 12/07/17 Entered 12/07/17 15:34:36

Document Page 11 of 6 bumber (if known) Doc 1 Desc Main Debtor 1 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. Yes. Describe..... Flat screen TV, computer, cell phone \$1,000 1,000.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes. 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. Describe..... \$250 Everyday clothes, shoes, accessories 250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... Costume jewelry \$200 200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Yes Describe.... Family pets; 1 dog \$0 0.00

14. Any other personal and ho No.	ousehold items you did not already list, including any health aids you did not list	
Yes. Describe	books, CDs, DVDs & Family Photos	\$50
	of your entries from Part 3, including any entries for pages you have attached er here	

Describe Your Financial Assets Part 4:

Do you own or have any legal or equitable interest in any of the following?

16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No. Describe.....

Current value of the portion you own? Do not deduct secured claims or exemptions

0.00

50.00 \$3,000.00

Michaela Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36

Document Page 12 of 6 umber (if known)

Page 12 of 6 umber (if known) Debtor 1

Document Last Name Middle Name

Desc Main

17.	•	Checking, savings	, or other financial accounts; ce f you have multiple accounts w		•	dit unions, brokerage	nouses,			
	Yes.	Describe	Account Type:	Insti	tution name:					
	100.	Describe	Checking Account		Harris Bank			 \$,000.00
18.			ublicly traded stocks ment accounts with brokerage	firms, money r	market accounts			•		
	Yes.	Describe	Institution or issuer name:					\$		0.00
19.	Non-public	ly traded stock	and interests in incorpora	nted and unit	ncorporated bus	inesses, including	an interest in			
	Yes.	Describe	Name of Entity and Percei	nt of Owners	hip:			\$		0.00
20.	Negotiable Non-negoti	instruments includ	e bonds and other negotia e personal checks, cashiers' cl re those you cannot transfer to	necks, promiss	ory notes, and mon	ey orders.				
	No. Yes.	Describe	Issuer name:					\$		0.00
21.		t or pension acc Interests in IRA, El	counts RISA, Keogh, 401(k), 403(b), th	nrift savings ac	counts, or other per	nsion or profit-sharing	plans	·		
	Yes.	Describe	Type of account and Instit 401(k) or similar plan	ution name:	With Employer			 \$	U	<u>nknow</u> n 0.00
22.	Your share		payments sits you have made so that you andlords, prepaid rent, public u Institution name or individu	ilities (electric,						
23.	Annuities (A contract for a	periodic payment of mon	ey to you, e	ither for life or fo	or a number of yea	rs)	\$		0.00
24.	Yes.		Issuer name and description		program, or und	ler a qualified state	e tuition program.	\$		0.00
	No.	§ 530(b)(1), 529A	(b), and 529(b)(1).							
25.	Yes.		Institution name and description interests in property (oth					\$		0.00
	No. Yes.	Describe						l		
26.			marks, trade secrets, and mes, websites, proceeds from			ds.		\$		0.00
	No. Yes.	Describe						\$		0.00
27.	-	· ·	other general intangibles xclusive licenses, cooperative	association hol	ldings, liquor license	es, professional licens	es	•		
	Yes.	Describe						\$		0.00

Michaela Case 17-36395 Doc 1 Debtor 1

Filed 12/07/17
Document P

Desc Main

Middle Name

Entered 12/07/17 15:34:36 Page 13 of 6 dumber (if known)

Mor	ney or property owed to	you?	Current value of the portion you own? Do not deduct secured claims or exemptions
28.	Tax refunds owed to y No.		7
	Yes. Describe		\$0.00
29.	Family support Examples: Past due or lui No.	np sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	-
	Yes. Describe		s 0.00
30.	Other amounts someo	le owes you	<u> </u>
		disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, npaid loans you made to someone else	
	Yes. Describe		\$ 0.00
31.	Interest in insurance p Examples: Health, disabil No.	blicies y, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary:	
	Yes. Describe	Health Insurance with employer \$0 Term Life insurance; no cash surrender value \$0	\$ 0.00
32.			
33.	Claims against third pa	rties, whether or not you have filed a lawsuit or made a demand for payment sloyment disputes, insurance claims, or rights to sue	\$0.00
	No. Yes. Describe		\$0.00
34.	No. Yes. Describe	nliquidated claims of every nature, including counterclaims of the debtor and rights	7
	_		\$0.00
35.	Any financial assets you No.	u did not already list	
	Yes. Describe		\$ <u>0.0</u> 0
		all of your entries from Part 4, including any entries for pages you have attached	\$1,000.00
1	for Part 4. Write that nu	nber here>	
	art or	Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37.	No. Yes.	y legal or equitable interest in any business-related property?	
			Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable o	commissions you already earned	
	Yes. Describe		\$ <u>0.0</u> 0

Michaela Case 17-36395 Doc 1 Desc Main

Filed 12/07/17 Entered 12/07/17 15:34:36

Document Page 14 of 66 Pumber (if known) Middle Name

39.		uipment, furnishings, and supplies	
	Examples: E	:: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic de	evices
	Yes.	Describe	
			\$0.00
40.	No.	y, fixtures, equipment, supplies you use in business, and tools of your trade	
	Yes.	Describe	
			\$0.00
41.	Inventory		
	No. Yes.	Describe	
	1 cs.	. Describe	\$0.00
42.		in partnerships or joint ventures	
	No.	Name of Entity and Percent of Ownership:	
	Yes.	Describe	\$ 0.00
43.	Customer li	r lists, mailing lists, or other compilations	· · · · · · · · · · · · · · · · · · ·
	No.		
	Yes.	Describe	\$ 0.00
44.	Any busine	ness-related property you did not already list	<u> </u>
	No.		
	Yes.	Describe	\$ 0.00
			\$ <u>0.0</u> 0
45.	Add the dol	ollar value of all of your entries from Part 5, including any entries for pages you have attached	
	for Part 5. V	Write that number here>	\$ 0.00
	Part 6: D	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
		If you own or have an interest in farmland, list it in Part 1.	
46.		wn or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Yes.	Describe	
		. Besonbe	\$0.00
47.	Farm anima		
	No.	:: Livestock, poultry, farm-raised fish	
	Yes.	Describe	
			\$0.00
48.	No.	ither growing or harvested	
	Yes.	Describe	
			\$0.00
49.	Farm and fi	l fishing equipment, implements, machinery, fixtures, and tools of trade	
	INO.		
	Yes	Describe	
	Yes.	Describe	\$0.00
50.	Farm and fi	fishing supplies, chemicals, and feed	\$0.00
50.	Farm and fi	I fishing supplies, chemicals, and feed	\$0.00
50.	Farm and fi	fishing supplies, chemicals, and feed	\$ <u>0.00</u>
	Farm and fi No. Yes.	I fishing supplies, chemicals, and feed	
	Farm and fi No. Yes.	Describe and commercial fishing-related property you did not already list	
	Farm and fi No. Yes. Any farm- a	Describe - and commercial fishing-related property you did not already list	\$0.00
	Farm and fi No. Yes. Any farm- a	Describe and commercial fishing-related property you did not already list	
51.	Farm and fi No. Yes. Any farm- a No. Yes. Add the dol	I fishing supplies, chemicals, and feed Describe - and commercial fishing-related property you did not already list Describe	\$\$ \$0.00
51.	Farm and fi No. Yes. Any farm- a No. Yes. Add the dol	Describe - and commercial fishing-related property you did not already list Describe	\$ <u>0.00</u> \$ <u>0.00</u>

Michaela Case 17-36395

Doc 1

Filed 12/07/17 Entered 12/07/17 15:34:36

Discument Page 15 of 66 Page 1 Desc Main

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List	Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No.		
Yes. Describe		\$0.00
54. Add the dollar value of all of your entries from Part 7. Write that number here	>	\$0.00
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$ 0.00
56. Part 2: Total vehicles, line 5	\$ 1,097.00	
57. Part 3: Total personal and household items, line 15	\$ 3,000.00	
58. Part 4: Total financial assets, line 36	\$ 1,000.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 5,097.00	\$ 5,097.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$5,097.00

Page 6 of 6 Official Form 106A/B Record # 755285 Schedule A/B: Property

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Fill in this in	Fill in this information to identify your case:							
Debtor 1	Michaela		Mills					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	ILLINOIS(State)					
Case Number	r							
(If known)								

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1		cy exemptions . 11 U.S.C.	3 522(0)(3)	
You are clair	ming federal exemptions. 11 U.S.C.	§ 522(b)(2)		
or any property	y you list on <i>Schedule A/B</i> that yo	u claim as exempt, fill in t	he information below.	
•	on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
rief escription:	2006 Chrysler Town & Country with over 108,000 miles	\$_1,097	\$_ 2,400	735 ILCS 5/12-1001(c)
ne from chedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
rief escription:	Furniture, linens, small appliances, table & chairs, bedroom set	\$1,500	\$ _ 1,500	735 ILCS 5/12-1001(b)
ne from chedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
rief escription:	Flat screen TV, computer, cell phone	\$_1,000	\$_1,000	735 ILCS 5/12-1001(b)
ne from chedule A/B:	07		100% of fair market value, up to any applicable statutory limit	
rief escription:	Everyday clothes, shoes, accessories	\$_250	\$ _ 250	735 ILCS 5/12-1001(a),(e)
ne from chedule A/B:	<u>11</u>		100% of fair market value, up to any applicable statutory limit	

Doc 1 Filed 12/07/17

Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 17 of 66 Number (if known) Document Michaela Debtor 1 Middle Name Last Name Additional Page Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(a),(e) Brief Costume jewelry \$ 200 \$_200 description: Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(a) Brief books, CDs, DVDs & Family \$_50 50 description: **Photos** 100% of fair market value, up to Line from 14 Schedule A/B: any applicable statutory limit Brief Checking Account, Harris Bank, 735 ILCS 5/12-1001(b) \$ 1,000 \$ 1,000 1,000.00 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief 401(k) or similar plan, With 735 ILCS 5/12-1006 Unknown Employer, 0.00 description: Line from 100% of fair market value, up to 21 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes.

Debtor 2 (Spouse, if filing)	Michaela First Name	Middle Name	Mills Last Name				
Debtor 2 (Spouse, if filing) United States Backets Case Number	First Name		Last Name				
(Spouse, if filing) United States Backets Case Number							
United States Ba							
Case Number _		Middle Name	Last Name				
_	ankruptcy Court for the : <u>NC</u>	DRTHERN Distr	ict of <u>ILLINOIS</u>				
_			(State)			Check if thi	s is an
						amended fi	ling
Official Fo	<u>rm 106D</u>						
chedule I	D: Creditors Wh	o Have Cl	aims Secured by F	Property			12/15
1. Do any credit	n all of the information belo	by your proper	•	ou have nothing else to re	port on this form.		
Part 1:	st All Secured Claims						
for each clai	m. If more than one credit	or has a particu	e secured claim, list the credito lar claim, list the other creditors ler according to the creditors na	s in Part 2.	Column A Amount of claim Do not deduct the value of collateral	Column A Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Wells Far	go Dealer SVC		Describe the property that secur	es the claim:	\$ _2,305.00	\$ 1,097.00	\$ <u>1,208.00</u>
Creditor's Na	ime		2006 Chrysler Town & Country	with over 108,000			
Po Box 16		h	niles				
Number	Street	L					
		<i>f</i>	As of the date you file, the claim	is: Check all that apply.			
Winterville	e NC 28	3590 L	Contingent Unliquidated				
City	State Z	p Code	Disputed				
Who owes t	he debt? Check one.	L	—□ ' lature of Lien. Check all that appl	v			
Debtor 1 o		Ï	An agreement you made (such a	•			
Debtor 2 d	•	•	car loan)	is mengage or cocarca			
=	and Debtor 2 only	1	Statutory lien (such as tax lien, m	nechanic's lien)			
At least o	ne of the debtors and another	j	Judgment lien from a lawsuit	,			
Check if	this claim relates to a	j	Other (including a right to offset)				
commun	-			5504			
Date Debt w	as incurred2007-09-	15 <u>L</u>	ast 4 digits of account number	5504			
Part 2:	st Others to Be Notified for	a Debt That You	Already Listed				
Use this page on		-	our bankruptcy for a debt that your bankruptcy for a debt that your bankruptcy for a debt that you	-	•		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 2,305.00

		Caso 17	3630E D	oc 1 Eilod	12/07/17	Entore	1 12/07/17 1	5·34·36 г	esc Main	
Fill i	n this inf	formation to iden	tify your case:				of 66	3.01.00	voco mani	
Deb	tor 1	Michaela			Mills					
		First Name	Middle Nar	ne	Last Name					
Deb	tor 2				· · · · · · · · · · · · · · · · · · ·					
(Spou	se, if filing)	First Name	Middle Nar	me	Last Name					
Linit	ed States I	Bankruptey Court for	the: NORTHERN	District of _ILLINOIS	3					
			<u></u>		(State)				Chook if	this is an
	e Number nown)								_	
	-	100=1	_						amende	a illing
Offic	ial Fo	orm 106E/	<u>F</u>							
Sche	edule	E/F: Credit	ors Who Ha	ave Unsecui	ed Claims					12/15
List the A/B: Procreditor needed	other pa operty (C rs with pa , copy th any additi	arty to any execut Official Form 106 <i>A</i> artially secured c e Part you need, ional pages, write	ory contracts or u NB) and on Sched laims that are liste fill it out, number	1 for creditors with inexpired leases that fule G: Executory Co ed in Schedule D: Co the entries in the bo ase number (if know	nt could result in a contracts and Unex reditors Who Have exes on the left. At	a claim. Also xpired Lease re Claims Sec	list executory contra s (Official Form 106 sured by Property. If	acts on <i>Schedule</i> G). Do not include more space is		
		litara hava priarit	v unaccured claim	no against you?						
1. 00	-	•	y unsecured clain	is against you?						
l ⊔	No. Go	to Part 2.								
	Yes.									
noi	npriority a secured o	amounts. As much	n as possible, list th Continuation Page	. If a claim has both ne claims in alphabet of Part 1. If more tha ne instructions for this	ical order accordin an one creditor hold	ng to the credi	tor's name. If you ha r claim, list the other	ve more than two creditors in Part 3	priority	
								Total claim	Priority amount	Nonpriority amount
2.1	IRS Pric	ority Debt		Last 4 digits of	account number			\$_4,000.00	\$ 4,000.00	\$ <u>0.00</u>
	Creditor's N	lame		· ·	-					
	PO Box			When was the	debt incurred?	2014				
	Number	Street								
					you file, the claim is	is: Check all th	at apply.			
	Philadel	phia	PA 19101	Contingent						
	City	<u></u>	State Zip Code	Unliquidated						
W	_	the debt? Check or	ne.	Disputed						
	Debtor 1	•								
-	Debtor 2	•			ITY unsecured clair	im:				
	=	and Debtor 2 only		=	pport obligations	41				
1 =	=	one of the debtors a		Taxes and C	ertain other debts you	u owe the gove	nment			
4	_	if this claim relates inity debt	s to a	Claims for do	eath or personal injur	v while vou wer	e			
Is		n subject to offest	?	intoxicated	saar or poroonaringar,	, , ou				
	No			Other. Speci	fy					
	Yes									
Part	2: L	ist All of Your NO	NPRIORITY Unsecu	red Claims						
3. Do	any cred	litors have nonpr	iority unsecured o	claims against you?						
		u have nothing to	report in this part.	Submit this form to t	he court with your	other schedu	es.			
	Yes.	our nonnrierity	secured claims :-	the alphabetical a	der of the credits	r who holds	anch claim. If a arad	itor has more than	one	
noi inc	npriority uluded in I	unsecured claim, I Part 1. If more tha	ist the creditor sepa n one creditor hold	n the alphabetical on arately for each clain is a particular claim,	n. For each claim li	isted, identify	what type of claim it	is. Do not list clair	ns already	
cia	iiii ol	it the Continuation	ii aye Ui Fall Z.							Total claim

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Debtor	1 Michaela	Document P	age 20 of 66 (ase Number (if known)	
	First Name Middle Name	Last Name	, ,	
4.1	Armor Systems CO	Last 4 digits of account number	<u>7865</u>	<u>\$ 150.00</u>
	Creditor's Name		2014-2014	
	1700 Kiefer Dr Ste 1	When was the debt incurred?	2014-2014	
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
		Contingent		
	Zion IL 60099	Unliquidated		
Ι,	City State Zip Code Who owes the debt? Check one.	Disputed		
`i		ш .		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured of	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
j	At least one of the debtors and another	Obligations arising out of a separati		
[Check if this claim relates to a	that you did not report as priority cla		
Ι.	community debt	Debts to pension or profit-sharing p	lans, and other similar debts	
	s the claim subject to offest?	M. C. J.D. IA		
	=	Other. Specify Medical Debt		
4.2	Yes AT T U-Verse	Last 4 digits of account number	9576	\$ 688.00
4.2	Creditor's Name			-
	Po Box 3097	When was the debt incurred?	2017-2017	
	Number Street			
		A	Observation all About a realise	
		As of the date you file, the claim is:	: Спеск ан тлат арргу.	
	Bloomington IL 61702	Contingent		
	City State Zip Code	Unliquidated		
\	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
[Debtor 2 only	Type of NONPRIORITY unsecured of	claim:	
[Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	aims	
'	community debt	Debts to pension or profit-sharing p	olans, and other similar debts	
!	s the claim subject to offest?			
	No	Other. Specify Collecting for C	Creditor	
	Yes			1 200 00
4.3	AWL INC	Last 4 digits of account number		\$ <u>1,200.00</u>
	Creditor's Name 2128 North 14th St	When was the debt incurred?		
	Number Street	when was the dest meaned:		
	#1 Box 130	As of the date you file, the claim is:	: Check all that apply.	
	Ponca City OK 74601	Contingent		
	City State Zip Code	Unliquidated		
\	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
i	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
i	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
1	community debt	Debts to pension or profit-sharing p		
1	s the claim subject to offest?		,	
	No	Debt Owed		

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 21 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.4 Capital One Bank	Last 4 digits of account number 5248	\$ <u>2,238.50</u>
Creditor's Name		
PO Box 60024	When was the debt incurred? 2017	
Number Street		
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
City Of Industry CA 91716		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
	-	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Charak if this alaim malatas to a	that you did not report as priority claims	
Check if this claim relates to a		
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	_	
No	Other. Specify Credit Card or Credit Use	
Yes		
4.5 Diagnostic Radiology Specialists	Last 4 digits of account number	\$ 3,329.00
Creditor's Name		
Dept 4062	When was the debt incurred?	
Number Street		
- Nambol Subst		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Carol Stream IL 60122	Unliquidated	
City State Zip Code	_ _	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
1 = 1	一	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Debt Owed	
Yes	Sales Spoolly	
DDT FD/CLM	Last 4 digits of account number0916	\$ 0.00
4.0	East 4 digits of decount number	4 -3:33
Creditor's Name 11100 Usa Pkwy	When was the debt incurred? 2008-2010	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Fishers IN 46037		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
1 = '	Toward MONDRIODITY	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	555.6 to portotor or profit ordering plants, and other similar dobte	
No	П	
	Other. Specify	
Yes		

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 22 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.7	DPT ED/SLM	Last 4 digits of account number0916	\$ <u>0.00</u>
	Creditor's Name	2000 2040	
	11100 Usa Pkwy	When was the debt incurred? 2008-2010	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Fishers IN 46037	Unliquidated	
	City State Zip Code	Disputed	
ľ	Who owes the debt? Check one.	□	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
[Check if this claim relates to a	that you did not report as priority claims	
l .	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
ľ	No		
1 7	Yes	Other. Specify	
4.8	DPT ED/SLM	Last 4 digits of account number 0305	\$ 0.00
4.0	Creditor's Name	Last 4 digits of account number	¥
	11100 Usa Pkwy	When was the debt incurred? 2009-2010	
	Number Street		
		As of the date you file the eleve in Charles II that and	
		As of the date you file, the claim is: Check all that apply.	
	Fishers IN 46037	Contingent	
	City State Zip Code	Unliquidated	
l v	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
[Debtor 2 only	Type of NONPRIORITY unsecured claim:	
[Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
r	Check if this claim relates to a	that you did not report as priority claims	
"	community debt	Debts to pension or profit-sharing plans, and other similar debts	
li li	s the claim subject to offest?		
	No	Other. Specify	
	Yes DDT ED/SI M	0205	* 0.00
4.9	DPT ED/SLM	Last 4 digits of account number 0305	\$ <u>0.00</u>
	Creditor's Name 11100 Usa Pkwy	When was the debt incurred? 2009-2010	
	Number Street		
	Humbor Outet		
		As of the date you file, the claim is: Check all that apply.	
	Fishers IN 46037	Contingent	
	City State Zip Code	Unliquidated	
v	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
[Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
į į	s the claim subject to offest?		
	No	Other. Specify	
	Yes		

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 23 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.10	DPT ED/SLM	Last 4 digits of account number 0416	<u>. </u>	<u>\$ 0.00</u>
	Creditor's Name	2000	0.2040	
	11100 Usa Pkwy	When was the debt incurred?	9-2010	
	Number Street			
		As of the date you file, the claim is: Check a	all that apply.	
		Contingent		
	Fishers IN 46037	Unliquidated		
١,	City State Zip Code Who owes the debt? Check one.	Disputed		
	Debtor 1 only	_		
i	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
l i	Debtor 1 and Debtor 2 only	Student loans		
l i	At least one of the debtors and another	Obligations arising out of a separation agree	ement or divorce	
l i	Check if this claim relates to a	that you did not report as priority claims		
'	community debt	Debts to pension or profit-sharing plans, and	d other similar debts	
!	s the claim subject to offest?	_		
!	No	Other. Specify		
	Yes PDT FD/CLM			. 0.00
4.11	DPT ED/SLM	Last 4 digits of account number0813	3	\$ <u>0.00</u>
	Creditor's Name 11100 Usa Pkwy	When was the debt incurred? 2009	9-2011	
	Number Street	when was the dest incurred:		
	Number			
		As of the date you file, the claim is: Check a	all that apply.	
	Fishers IN 46037	Contingent		
	City State Zip Code	Unliquidated		
1	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation agree	ment or divorce	
	Check if this claim relates to a	that you did not report as priority claims		
Ι.	community debt	Debts to pension or profit-sharing plans, and	1 other similar debts	
	s the claim subject to offest?			
	No Yes	Other. Specify		
4 12	DPT ED/SLM	Last 4 digits of account number 0826	3	\$ 0.00
4.12	Creditor's Name			•
	11100 Usa Pkwy	When was the debt incurred? 2009	9-2011	
	Number Street			
		As of the date you file, the claim is: Check a	all that apply.	
		Contingent		
	Fishers IN 46037	Unliquidated		
Ι,	City State Zip Code Who owes the debt? Check one.	Disputed		
∐ ì	Debtor 1 only			
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation agree	ement or divorce	
	=	that you did not report as priority claims	mont of divoloc	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and	d other similar debts	
1	s the claim subject to offest?	20210 to periodic of profit offaring plans, and		
	No	Other. Specify		
	Yes	<u> </u>		

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 24 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.13	DPT ED/SLM	Last 4 digits of account number	1203	\$ 0.00
	Creditor's Name		2000 2044	
	11100 Usa Pkwy	When was the debt incurred?	2009-2011	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Fishers IN 46037	Unliquidated		
Ι,	City State Zip Code Who owes the debt? Check one.	Disputed		
i	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured of	laim	
l i	Debtor 1 and Debtor 2 only	Student loans	iaiii.	
l i	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
'	community debt	Debts to pension or profit-sharing pl		
!	s the claim subject to offest?		,	
	No	Other. Specify		
	Yes			
4.14	DPT ED/SLM	Last 4 digits of account number	1203	\$ <u>0.00</u>
	Creditor's Name	When was the debt incurred?	2009-2011	
	11100 Usa Pkwy	when was the debt incurred?		
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
	Fishers IN 46037	Contingent		
	City State Zip Code	Unliquidated		
\	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
[Debtor 2 only	Type of NONPRIORITY unsecured of	elaim:	
[Debtor 1 and Debtor 2 only	Student loans		
[At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	ims	
	community debt	Debts to pension or profit-sharing pl	ans, and other similar debts	
	s the claim subject to offest?	_		
	No Yes	Other. Specify		
4.15	FED LOAN SERV	Last 4 digits of account number	0021	\$ 165,828.00
4.15	Creditor's Name			
	Po Box 60610	When was the debt incurred?	2014-2017	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Harrisburg PA 17106	Unliquidated		
Ι,	City State Zip Code	Disputed		
`i	Who owes the debt? Check one.	L		
	Debtor 1 only	- ()(0)(0)(0)(0)		
	Debtor 2 only	Type of NONPRIORITY unsecured of Student loans	oann.	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation	on agreement or diverse	
	At least one of the debtors and another	that you did not report as priority cla	-	
I	Check if this claim relates to a community debt	Debts to pension or profit-sharing pl		
1	s the claim subject to offest?	Debts to pension or promeshalling pr	and, and ontol offinial dobto	
	No	Other. Specify		
1 1	Yes			

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 25 of 66 Case Number (if known) Document Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** GE Capital Retail BANK \$ 672.00 Last 4 digits of account number _ Creditor's Name 2014-2014 120 Corporate Blvd Ste 1 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Norfolk VA 23502 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Unknown Credit Extension Yes Make Cents INC Last 4 digits of account number 4.17 Creditor's Name DBA Max Lend When was the debt incurred? Number PO Box 639 As of the date you file, the claim is: Check all that apply.

\$ 1,000.00 Contingent 58770 Parshall ND Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify PayDay Loan Yes Navient Solutions INC 0916 \$ 0.00 4.18 Last 4 digits of account number Creditor's Name 2008-2009 11100 Usa Pkwy When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Fishers 46037 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify _

Record # 755285

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 26 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.19	Navient Solutions INC	Last 4 digits of account number		\$ <u>0.00</u>
	Creditor's Name			
	11100 Usa Pkwy	When was the debt incurred? 2008-2009	1	
	Number Street			
		As of the date you file the plaim is. Check all that	annly	
		As of the date you file, the claim is: Check all that a	арріу.	
		Contingent		
	Fishers IN 46037	Unliquidated		
	City State Zip Code			
v	Vho owes the debt? Check one.	Disputed		
1 1	B 11. 4. 1	_		
	Debtor 1 only			
1 1	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
1 1	Debtor 1 and Debtor 2 only	Student loans		
		=		
[At least one of the debtors and another	Obligations arising out of a separation agreement of	divorce	
[Check if this claim relates to a	that you did not report as priority claims		
۱ ۱	community debt	Debts to pension or profit-sharing plans, and other s	similar dehts	
	s the claim subject to offest?	bests to pension of profit-sharing plans, and other t	minial debts	
	No	Other. Specify		
	Yes	_	_	
4.20	Navient Solutions INC	Last 4 digits of account number0305		\$ 0.00
4.20		Last 4 digits of account number		*
	Creditor's Name	When was the debt incurred? 2009-2009		
	11100 Usa Pkwy	When was the debt incurred? 2009-2009		
	Number Street			
		As of the date you file, the claim is: Check all that a	apply.	
		Contingent		
	Fishers IN 46037			
		Unliquidated		
١,	City State Zip Code	Disputed		
'	Vho owes the debt? Check one.	□ '		
	Debtor 1 only			
[Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	=			
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation agreement of	r divorce	
i		that you did not report as priority claims		
[Check if this claim relates to a			
	community debt	Debts to pension or profit-sharing plans, and other s	similar debts	
!	s the claim subject to offest?			
	No	Other. Specify		
[Yes			
1	Navient Solutions INC	Last 4 digits of account number 0305		\$ 0.00
4.21	Navierit Colutions IIVC	Last 4 digits of account number 0305		\$ 0.00
	Creditor's Name	0000 0000		
	11100 Usa Pkwy	When was the debt incurred? 2009-2009	<u>'</u>	
	Number Street			
	Tuniss.			
		As of the date you file, the claim is: Check all that a	apply.	
		Contingent	•••	
	Fishers IN 46037	_		
		Unliquidated		
١,	City State Zip Code	Disputed		
'	Vho owes the debt? Check one.			
	Debtor 1 only			
l î	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
L	Debtor 1 and Debtor 2 only	Student loans		
[At least one of the debtors and another	Obligations arising out of a separation agreement of	r divorce	
		that you did not report as priority claims		
L	Check if this claim relates to a	_		
1	community debt	Debts to pension or profit-sharing plans, and other s	similar debts	
1	s the claim subject to offest?			
	No	Other. Specify		
		U outer, specify		
	Yes			

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 27 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.22 Navient Solutions INC	Last 4 digits of account number	0416	\$_0.00
Creditor's Name		2009-2009	
11100 Usa Pkwy	When was the debt incurred?	2009-2009	
Number Street			
	As of the date you file, the claim	is: Check all that apply.	
Fighers	Contingent		
Fishers IN	Unliquidated		
Who owes the debt? Check one.	tate Zip Code Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and a	nother Obligations arising out of a separ	ration agreement or divorce	
Check if this claim relates to	a that you did not report as priority	claims	
community debt	Debts to pension or profit-sharing	g plans, and other similar debts	
Is the claim subject to offest?	_		
No No	Other. Specify		
Yes Navient Solutions INC	Last 4 digits of account number	0813	\$ 0.00
4.23 Navierit Solutions INC Creditor's Name	Last 4 digits of account number		·
11100 Usa Pkwy	When was the debt incurred?	2009-2010	
Number Street			
	As of the date you file, the claim	is: Check all that apply.	
	Contingent		
Fishers IN			
City S Who owes the debt? Check one.	tate Zip Code Disputed		
Debtor 1 only	ш .		
Debtor 2 only	Type of NONPRIORITY unsecure	d alaim.	
Debtor 1 and Debtor 2 only	Student loans	u Claiii.	
At least one of the debtors and a	=	ration agreement or divorce	
Check if this claim relates to	—		
community debt	Debts to pension or profit-sharing		
Is the claim subject to offest?			
No	Other. Specify		
Yes		0000	. 0.00
4.24 Navient Solutions INC	Last 4 digits of account number	0826	\$ <u>0.00</u>
Creditor's Name 11100 Usa Pkwy	When was the debt incurred?	2009-2010	
Number Street			
	As a fall or data area file also a later.	to OL LIBERT	
	As of the date you file, the claim	is: Check all that apply.	
Fishers IN	Contingent Unliquidated		
	tate Zip Code		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and a	-		
Check if this claim relates to community debt	a that you did not report as priority Debts to pension or profit-sharing		
Is the claim subject to offest?	LI Debts to pension or profit-snaring	g pians, and other similar debis	
No	Other. Specify		
Yes			

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 28 of 66 Case Number (if known) **Document** Michaela Debtor 1 Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** \$ 0.00 Navient Solutions INC

4.25	Last 4 digits of account number1200	\$ <u>0.00</u>
Creditor's Name		
11100 Usa Pkwy	When was the debt incurred? 2009-2010	
Number Street		
- Names		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Fishers IN 46037		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	Debts to perision of profit-straining plans, and other similar debts	
_	_	
No	Other. Specify	
Yes		
4.26 Navient Solutions INC	Last 4 digits of account number 1203	<u>\$ 0.00</u>
Creditor's Name		
11100 Usa Pkwy	When was the debt incurred? 2009-2010	
Number Street		
Number Sueet		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Fishers IN 46037	Unliquidated	
City State Zip Code		
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
 	Time of NONDRIORITY was sound alaims	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No		
│	Other. Specify	
Yes	0004	
4.27 OPP Loans	Last 4 digits of account number <u>2661</u>	<u>\$ 1,636.00</u>
Creditor's Name	2017 2017	
130 E Randolph St Ste 34	When was the debt incurred? 2017-2017	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Chicago IL 60601	Unliquidated	
City State Zip Code	Disputed	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
 	=	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Personal Loan	
Yes	Outor. Opeony	

Official Form 106E/F

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 29 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.28 People GAS Light AND COKE COMP	Last 4 digits of account number	4647	\$ <u>107.00</u>
Creditor's Name	_		
8014 Bayberry Rd	When was the debt incurred?	2015-2015	
Number Street			
	As of the date you file, the claim is:	Check all that apply.	
	Contingent		
Jacksonville FL 32256	Unliquidated		
City State Zip Code Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured c	laim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
Check if this claim relates to a	that you did not report as priority clai	•	
community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
Is the claim subject to offest?	_		
No	Other. Specify Collecting for Cr	editor	
Yes Participant Assessment Assess			. 070.00
4.29 Portfolio Recovery Assoc.	Last 4 digits of account number		\$ <u>672.00</u>
Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?		
Number Street			
Names Sass			
	As of the date you file, the claim is:	Check all that apply.	
Norfolk VA 23502	Contingent		
City State Zip Code	Unliquidated		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured c	aim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation		
Check if this claim relates to a	that you did not report as priority clai		
community debt Is the claim subject to offest?	Debts to pension or profit-sharing pla	ans, and other similar debts	
No	Other. Specify Credit Card or C	redit Use	
Yes	Other. Specify	-Tour Goo	
4.30 Primerica	Last 4 digits of account number		\$ 75.00
Creditor's Name			
1 Primerica Parkway	When was the debt incurred?		
Number Street			
	As of the date you file, the claim is:	Check all that apply.	
Duluth GA 30099	Contingent		
Duluth GA 30099 City State Zip Code	Unliquidated		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured c	laim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation	n agreement or divorce	
Check if this claim relates to a	that you did not report as priority clai		
community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
Is the claim subject to offest?			
■ No	Other. Specify Debt Owed		

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 30 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** SCH Laboratory Physicians SC **\$** 389 00

Creditor's Name		
Croaner o Hame		
5700 Southwyck Blvd	When was the debt incurred?	
Number Street		
Number Subst		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Toledo OH 43614		
	Unliquidated	
City State Zip Code Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Student loans	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	Debts to pension of profit-straining plans, and other similar debts	
_		
No	Other. Specify Debt Owed	
Yes	-	
4.32 Sprint	Last 4 digits of account number 0133	\$ 57.00
Creditor's Name		·
	When was the debt incurred? 2014-2014	
8014 Bayberry Rd	When was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Jacksonville FL 32256	Unliquidated	
City State Zip Code		
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
Debtor 2 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest?	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred?	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$ 10,200.00
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number	\$ 10,200.00
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$ 10,200.00
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ 10,200.00
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ <u>10,200.00</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.33 Swedish Covenant Hospital Creditor's Name 5145 N. California Ave Number Street Chicago IL 60625 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for Creditor Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ 10,200.00

Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Case 17-36395 Page 31 of 66 Case Number (if known) **Document** Michaela Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.34	Swedish Covenant Medical Group	Last 4 digits of account number	\$ <u>474.00</u>
	Creditor's Name	When we the dold become do	
	7452 Solution Center	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago IL 60677	Contingent	
	City State Zip Code	Unliquidated	
١ ١	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
l i	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
l i	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?	_	
	No	Other. Specify Debt Owed	
	Yes Swedish Emergency Associates PC	Land Address of a country with an	\$ 993.00
4.35	Creditor's Name	Last 4 digits of account number	\$ <u>990.00</u>
	PO Box 366	When was the debt incurred?	
	Number Street		
		As of the date was file the plainties Ob all all that such	
		As of the date you file, the claim is: Check all that apply.	
	Hinsdale IL 60522	Contingent	
	City State Zip Code	Unliquidated	
'	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
Ι.	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
l i	No	Town and Debt Owed	
l i	Yes	Other. Specify Debt Owed	
4.36	Syncb/Amazon	Last 4 digits of account number NULL	\$ 470.00
4.00	Creditor's Name		•
	Po Box 965015	When was the debt incurred? 2012-2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Orlando FL 32896	Unliquidated	
١,	City State Zip Code Who owes the debt? Check one.	Disputed	
l ì			
	Debtor 1 only	To a CAIOAIDDIODITY and a labor	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	Unligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	E personal to benign or brothe situating brane, and other allithat denies	
	No	Other. Specify Credit Card or Credit Use	
	Yes		

Official Form 106E/F

Debtor 1	Case 1	7-36395	Doc 1		Entered 12/07/17 15:34:36 Page 32 of 66 Page 32 of 66	Desc Main	_
	First Name	Middle Name	•	Last Name			
Pari	Your NONPRIORIT	Y Unsecured Cla	aims - Continu	ation Page			
After lis	sting any entries on this	page, number	them beginni	ng with 4.4, followed by 4.	5, and so forth.		Total Clai
4.37	Target National Bank Creditor's Name		_ La	st 4 digits of account numbe	er		\$ <u>160.00</u>
	3701 Wayzata Blvd		Wh	nen was the debt incurred?			
	Number Street		_				
	Mail Stop 3C-I		As	of the date you file, the clai	m is: Check all that apply.		
, w	Minneapolis City /ho owes the debt? Check	MN 55416 State Zip Co		Contingent Unliquidated Disputed			
	Debtor 1 only						
[Debtor 2 only		Ту	pe of NONPRIORITY unsecu	red claim:		
<u> </u>	Debtor 1 and Debtor 2 only	y	닏	Student loans			
<u> </u>	At least one of the debtors	and another	Ш	Obligations arising out of a sep	v		
	Check if this claim relat community debt	es to a		that you did not report as prior Debts to pension or profit-shar	ity claims ing plans, and other similar debts		

4.37		Last 4 digits of account number	
	Creditor's Name		
	3701 Wayzata Blvd	When was the debt incurred?	
	Number Street		
	Mail Stop 3C-I	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Minneapolis MN 55416	Unliquidated	
v	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Ī	Check if this claim relates to a	that you did not report as priority claims	
"	community debt	Debts to pension or profit-sharing plans, and other similar debts	
<u>ls</u>	s the claim subject to offest?		
	No	Other. Specify Credit Card or Credit Use	
	Yes		
4.38	Wings Financial Credit Union	Last 4 digits of account number	\$ <u>114.00</u>
	Creditor's Name		
	14988 Glazier Ave	When was the debt incurred?	
	Number Street		
	Suite 100	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Apple Valley MN 55124	Unliquidated	
v	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
1 6		that you did not report as priority claims	
L	Check if this claim relates to a		
"	community debt	Debts to pension or profit-sharing plans, and other similar debts	
] 	community debt		

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Document Michaela

Page 33 of 66 Case Number (if known)

Debtor 1

List Others to Be Notified for a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankrupt example, if a collection agency is trying to collect from you for a debt yo 2, then list the collection agency here. Similarly, if you have more than o additional creditors here. If you do not have additional persons to be not	ou owe to someone else, list the original creditor in Parts 1 or one creditor for any of the debts that you listed in Parts 1 or 2, list the
ERC	On which entry in Part 1 or Part 2 list the original creditor?
Name PO Box 57610	Line of (Check one):
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville FL 32241 City State Zip Code	Last 4 digits of account number <u>9576</u>
AT&T Corp, Bankruptcy Dept.	On which entry in Part 1 or Part 2 list the original creditor?
Name One AT&T Way, Suite 3A104	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Bedminster NJ 07921 City State Zip Code	Last 4 digits of account number <u>95</u> 7 <u>6</u>
Clerk, First Mun Div, 2017-M1-105248	On which entry in Part 1 or Part 2 list the original creditor?
Name 50 W. Washington St., Rm. 1001	Line _ 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Chicago IL 60602 City State Zip Code	Last 4 digits of account number <u>5248</u>
Blitt & Gaines, 2017-M1-105248	On which entry in Part 1 or Part 2 list the original creditor?
Name 661 Glenn Ave	Line _ 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling IL 60090 City State Zip Code	Last 4 digits of account number <u>5248</u>
Peoples Gas, Bankruptcy Dept.	On which entry in Part 1 or Part 2 list the original creditor?
Name 200 E. Randolph Dr.	Line28 of (Check one):
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Chicago IL 60601	Last 4 digits of account number 4647
City State Zip Code	
Sprint, Bankruptcy Dept.	On which entry in Part 1 or Part 2 list the original creditor?
Name PO Box 7949	Line 32 of (Check one):
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Overland Park KS 66207	Last 4 digits of account number <u>0133</u>
City State Zip Code	

Official Form 106E/F

otor 1 Michaela	Page 34 of 60		Number (if known)		
First Name Middle Name Swedish Covenant Med. Assoc., Bankruptcy Dept.	Last Name				
	_	On which entry in Part 1 or Part 2 list the original creditor?			
Name 3649 Paysphere Circle		Line 33 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
Number Street	_		Part 2: Creditors with Nonpriority Unsecured Claims		
Chicago IL	60674	Last 4 digits of account number _			
City State Zip 0	Code				
Armor Systems Co., Bankruptcy Dept.	_	On which entry in Part 1 or Part 2 li	ist the original creditor?		
^{Name} 1700 Kieffer Dr., Ste. 1		Line 35 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
Number Street	_		Part 2: Creditors with Nonpriority Unsecured Claims		
Zion IL	60099	Last 4 digits of account number _			
City State Zip C	Code				
Target Card Services	_	On which entry in Part 1 or Part 2 li	ist the original creditor?		
Name PO Box 673		Line 37 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
Number Street	_		Part 2: Creditors with Nonpriority Unsecured Claims		
Minneapolis MN	- 55440	Last 4 digits of account number			

State Zip Code

City

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 35 of 66 Case Number (if known) **Document**

Debtor 1 Michaela

Middle Name

Add the Amounts for Each Type of Unsecured Claim

6.	Total the amounts of certain types of unsecured claims.	This information is for statistical reporting purposes only. 28 U.S.C. § 159.
	Add the amounts for each type of unsecured claim.	

			Total claim
			0.00
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.00
	6b. Taxes and Certain other debts you owe the government	6b.	\$4,000.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$4,000.00
			Total claim
Total claims from Part 2	6f. Student loans	6f.	Total claim \$165,828.00
	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	405 000 00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority		\$165,828.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims6h. Debts to pension or profit-sharing plans, and other	6g.	\$

		Caso 17 3	26205 Doc 1 [Filad 12/07/17	Entor	ed 12/07/17	15:34:36	Desc Main	
Fi	ll in this in	formation to identify				6 of 66			
D	ebtor 1	Michaela		Mills					
D	ebtor 2	First Name	Middle Name	Last Name					
	pouse, if filing)	First Name	Middle Name	Last Name					
U	nited States	Bankruptcy Court for th	ne : <u>NORTHERN</u> District of _					_	
	ase Number f known)			(State)				Check if this i amended filin	
Off	icial Fo	orm 106G							
Scł	nedule	G: Executor	ry Contracts and	Unexpired Lea	ses				12/15
nfori	mation. If n	nore space is neede	essible. If two married people ed, copy the additional page	, fill it out, number the e					
		-	and case number (if known). ntracts or unexpired leases?						
	_	_	omit this form to the court with		ou have no	thing else to report or	n this form.		
[_		tion below even if the contrac						
						, , ,	,		
			company with whom you ha						
	nexpired le		en priorie). See the instruction		ruction boo	kiet for more example	es of executory co	onitacis and	
	Person or	company with who	m you have the contract or I	ease		State what the	contract or leas	e is for	
2.1]								
	Name				-				
	Number	Street			-				
	City		State Zip	Code	_				
2.2									
	Name				_				
	Number	Street			_				
	City		State Zip	Code	_				
2.3									
	Name				-				
	Number	Street			_				
	City		State Zip	Code	_				
	1								
2.4					_				
	Name				_				
	Number	Street							
	City		State Zip	Code	_				
2.5									
	Name				_				
	Number	Street			_				

State Zip Code

City

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Fill in this information to identify your case:				
Debtor 1	Michaela		Mills	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the : <u>NORTHERN</u> District of _	ILLINOIS(State)	
Case Number	r		(State)	
(If known)				

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

iny Additional Pages, write your name and case number (if known). Answer every question.									
1. D	o you have an	y codebtors? (If you are filing	a joint case, do not list eithe	er spouse as a code	btor.)				
	No.								
	Yes								
		B years, have you lived in a co nia, Idaho, Lousiiana, Nevada,		- '	unity property states and territories include and Wisconsin.)				
	No. Go to li	ne 3.							
Ī	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?								
	_	nwhich community state or terri	tory did you live?	Fill in	the name and current address of that person.				
	Name of y	our spouse, former spouse or legal equiv	alent						
	Number	Street							
	City		State	Zip Code					
	-	r Schedule G to fill out Colum		r scnedule G (Oπi	Column 2: The creditor to whom you owe the debt Check all schedules that apply:				
3.1					Schedule D, line				
	Name				Schedule E/F, line				
	Number	Street			Schedule G, line				
	City		State	Zip Code					
3.2					Schedule D, line				
	Name				Schedule E/F, line				
	Number	Street			Schedule G, line				
	City		State	Zip Code					
3.3					Schedule D, line				
	Name				Schedule E/F, line				
	Number	Street			Schedule G, line				
	City		State	Zip Code					

Official Form 106H Record # 755285 Schedule H: Your Codebtors Page 1 of 1

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 38 of 66

Fill in this ir	formation to iden	tify your case:	01 00		
Debtor 1	Michaela		Mills		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	r the : <u>NORTHERN DISTRICT C</u>	OF ILLINOIS_		
Case Numbe	r			Check if this is:	
(If known)				An amended filing	
				A supplement showing	j post-petit
				chanter 13 income as	of the follo

Official Form 106I

ion chapter 13 income as of the following date:

MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employm	ent							
Fill in your employment information		Debtor 1		Debtor 2 or non-filing spouse				
attach a separate page with	If you have more than one job, attach a separate page with information about additional employers.		ı	Employed Not employed				
Include part-time, seasona self-employed work.	l, or Occupation	Admin Assistant						
Occupation may Include st or homemaker, if it applies.		Ounce of Prevent	ion Fund					
	Employers address	33 W. Monroe Sui	te 2400					
		Chicago, IL 60603	<u> </u>	,				
	How long employed there?	Since 12/1/2016						
D. 42								
Estimate monthly income spouse unless you are sep If you or your non-filing spo	Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.							
			For Debtor 1	For Debtor 2 or non-filing spouse				
List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.			\$3,400.00	\$0.00				
3. Estimate and list monthly	3. Estimate and list monthly overtime pay.			\$0.00				
4. Calculate gross income.	Add line 2 + line 3.		\$3,400.00	\$0.00				

Official Form 106I Record # 755285 Schedule I: Your Income Page 1 of 2 Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 39 of 66
Case Number (if known) Document

Michaela Debtor 1

First Name Middle Name Last Name

				For Debtor 1		Debtor 2 or -filing spouse		
	Copy	y line 4 here	4.	\$3,400.00		\$0.00		
5. L	ist all	payroll deductions:		_				
	5a. T	ax, Medicare, and Social Security deductions	5a.	\$363.40		\$0.00		
	5b. N	Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. V	oluntary contributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. F	Required repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. l ı	nsurance	5e.	\$6.14		\$0.00		
	5f. C	Oomestic support obligations	5f.	\$0.00		\$0.00		
	5g. L	Inion dues	5g.	\$0.00		\$0.00		
	5h. C	Other deductions. Specify:	5h.	\$0.00		\$0.00		
6. A	dd the	payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$369.54		\$0.00		
7. Ca	alcula	te total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,030.46		\$0.00		
8. Li	st all	other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$300.00		\$0.00		
	8b.	Interest and dividends	8b.	\$0.00		\$0.00		
	8c.	Family support payments that you, a non-filing spouse, or a	8c.	\$ 0.00		\$ 0.00		
		dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.						
	8d.	Unemployment compensation	8d.	\$0.00		\$0.00		
	8e.	Social Security	8e.	\$0.00		\$0.00		
	8f.	Other government assistance that you regularly receive	8f.	\$0.00		\$0.00		
		Include cash assistance and the value (if known) of any non-cash						
		assistance that you receive, such as food stamps (benefits under the						
		Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:						
	8g.	Pension or retirement income	8g	\$0.00		\$0.00		
	8h.	Other monthly income. Specify:	8h.	\$0.00		\$0.00		
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9	\$300.00		\$0.00		
10.		ulate monthly income. Add line 7 + line 9.	10.	\$3,330.46 +		\$0.00	= [\$3,330.46
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	_				_	
11.	State	e all other regular contributions to the expenses that you list in Schedule	e J.					
	Inclu	de contributions from an unmarried partner, members of your household, yo	our dependen	ts, your roommates, and	t			
		friends or relatives.						
		ot include any amounts already included in lines 2-10 or amounts that are n		pay expenses listed in	Sched	ule J.		
	Spec	jify:					11.	\$0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The res	sult is the com	bined monthly income.			г	
	Write	e that amount on the Summary of Schedules and Statistical Summary of Ce	ertain Liabilitie	es and Related Data, if i	t applies		12.	\$3,330.46
13.	_	ou expect an increase or decrease within the year after you file this form	?					
	X I							
		Yes. Explain:						

Fi	ll in this in	formation to identify you	ur case:				
D	ebtor 1	Michaela		Mills	Check if this is:		
_		First Name	Middle Name	Last Name	An amende	•	
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name		ent showing post of the following d	-petition chapter 13 ate:
U	nited States	Bankruptcy Court for the :	NORTHERN DISTRICT C	F ILLINOIS_			
	ase Number f known)	-			MM / DD / Y	YYYY	
					A separate	filing for Debtor	2 because Debtor 2
Off	icial F	<u>orm 106J</u>			☐ maintains a	a separate house	hold.
Sc	hedul	e J: Your Exp	enses				12/14
more every	space is r question.	needed, attach another s			are equally responsible for supplyi ages, write your name and case nun	_	
	s this a joi	Describe Your Household					
1. 1		on case? So to line 2.					
	Yes.	Does Debtor 2 live in a s	eparate household?				
		No.					
		Yes. Debtor 2 must	t file a separate Schedul	e J.			
2.	-	nave dependents?	No X Yes. Fill out	this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Debtor 2			this information for dent	Son	20	No
		tate the dependents'					X Yes
	names.				Daughter	18	No
							X Yes
							Yes
							X No
							Yes
							X No
							Yes
3.	-	expenses include s of people other than	X No				
	-	and your dependents?	Yes				
Pai	rt 2:	stimate Your Ongoing Mo	nthly Expenses				
	-				m as a supplement in a Chapter 13	-	
-	enses as o applicable		ptcy is filed. If this is a	supplemental Schedule J	, check the box at the top of the for	m and fill in	
	-	=	=	nce if you know the value		v	our expenses
of SI	uch assista	ance and have included	it on Schedule I: Your	Income (Official Form 106	l.)		our expenses
4.		tal or home ownership extends for the ground or lot.	xpenses for your resid	ence. Include first mortgag	e payments and	4.	\$1,350.00
	-	cluded in line 4:				4.	ψ1,000.00
	4a. Re	al estate taxes				4a.	\$0.00
		operty, homeowner's, or r	enter's insurance			4b.	\$0.00
		me maintenance, repair,				4c.	\$0.00
	4d. Ho	meowner's association o	r condominium dues			4d.	\$0.00

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Document

Michaela

Debtor 1

Page 41 of 66
Case Number (if known)

First Name Middle Name Last Name Your expenses \$0.00 5. Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$225.00 Electricity, heat, natural gas 6a. 6b \$0.00 Water, sewer, garbage collection \$290.00 6c. Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify:_ 6d. 7. \$737.00 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$100.00 9. Clothing, laundry, and dry cleaning 10. \$80.00 10. Personal care products and services \$50.00 11. Medical and dental expenses 11. \$318.00 Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. \$0.00 Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15a. Life insurance \$0.00 15b. 15b. Health insurance \$80.00 15c. Vehicle insurance 15c. \$0.00 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Federal or State Tax Deductions or Repayments \$50.00 16. 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19 \$0.00 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. 20a. Mortgages on other property \$ 0.00 \$ 0.00 20b. 20b. Real estate taxes \$ 0.00 20c. 20c. Property, homeowner's, or renter's insurance \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e. 20e. Homeowner's association or condominium dues

Official Form 106J Record # 755285

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 42 of 66

Michaela

Debtor 1 Case Number (if known) First Name Middle Name Last Name \$42.00 Pet Care (\$40.00), Postage/Bank Fees (\$2.00), 21. 21. Other. Specify: \$3,322.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. \$3,330.46 Copy line 12 (your comibined monthly income) from Schedule I. 23a. \$3,322.00 23b. Copy your monthly expenses from line 22 above. 23b.-Subtract your monthly expenses from your monthly income. \$8.46 23c. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Yes. Explain Here:

Official Form 106J Record # 755285 Schedule J: Your Expenses Page 3 of 3

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT a	an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read correct.	the summary and schedules filed with this declaration and that they are true and
/s/ Michaela Mills Signature of Debtor 1	Signature of Debtor 2
Date _12/05/2017	Date
MM / DD / YYYY	MM / DD / YYYY

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

			ocument i	uuc ++ c
Fill in this in	formation to ide	ntify your case:		
		. , ,		
Debtor 1	Michaela		Mills	
	First Name	Middle Name	Last Name	
D-1-4 0				
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court f	or the : <u>NORTHERN</u> District of _		
			(State)	
Case Number	r		_	
(If known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

number (if	number (if known). Answer every question.							
Port 1: Give Details About Your Marital Status and Where You Lived Before								
01. What is your current marital status?								
М	arried							
<u> </u>	ot married							
	ng the last 3 years, have you lived anywhere other	than where you live no	ow?					
□ N	o. es. List all of the places you lived in the last 3 years.	Do not include where	to the pour					
_ _ '	es. List all of the places you lived in the last 3 years.	Do not include where	you live now.					
	Debtor 1	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there				
			Same as Debtor 1	Same as Debtor 1				
<u> </u>	2141 W Arthur Ave	FROM 09/2011						
	Chicago IL 60645-5514	To 06/2017						
_								
			community property state or territory? (Community levada, New Mexico, Puerto Rico, Texas, Washington.					
	Visconsin.)	,,		,				
■ N		(Official Farms 400LI)						
L 1	es. Make sure you fill out Schedule H: Your Codebto	ors (Official Form 106H)	•					
	_							
Part 2:	Explain the Sources of Your Income							

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 45 of 66

Michaela Mills Debtor 1 Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$37,113 From January 1 of current year until bonuses, tips bonuses, tips \$3,500(est) the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$35,346 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips \$3,500(est) (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$35,000(est) Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips \$3,500(est) (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 46 of 66

Michaela Mills Case Number (if known) _ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Identify Legal actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No. Yes. Fill in the details. Nature of the case Court or agency Status of the case Collection First Municipal District, Cook County Pending Capital One Bank Usa N A VS Michaela On appeal Mills CASE NUMBER#17M1105248 Concluded

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 47 of 66

Debto	r 1	Michaela		Mills	Case Number (if kno	own)	
		First Name Middle Name		Last Name			
10		nin 1 year before you filed for bankruptcy, weck all that apply and fill in the details below		of your property repossesse	d, foreclosed, garnished, attached, se	eized, or levied?	
		No. Go to line 11					
		Yes. Fill in the information below.					
11		nin 90 days before you filed for bankrupt efuse to make a payment because you o	-	-	nk or financial institution, set off an	y amounts from y	our accounts
		No. Go to line 11					
12	_	Yes. Fill in the information below. nin 1 year before you filed for bankruptcy	v was an	y of your property in the p	ossession of an assignee for the he	nafit of craditors	a
		rt-appointed receiver, a custodian, or and			occocion or an accignoc for the bo	none or orounding	, =
	■ N						
Pa	art 5:	List Certain Gifts and Contributions					
13	With	nin 2 years before you filed for bankrupto	cy, did y	ou give any gifts with a tot	al value of more than \$600 per perso	on?	
	_	No.					
14	_	Yes. Fill in the details for each gift.	a did		tions with a total value of more tha	n 6000 to any ab	auitu 2
'-	_	hin 2 years before you filed for bankrupto	cy, ala y	ou give any girts or contrib	utions with a total value of more tha	in \$600 to any ch	arity?
		No. Yes. Fill in the details for each gift.					
Pa	art 6:	List Certain Losses					
15		nin 1 year before you filed for bankruptcy nbling?	y or sinc	e you filed for bankruptcy,	did you lose anything because of th	neft, fire, other dis	saster, or
		No. Yes. Fill in the details for each gift.					
P	art 7:	List Certain Payments or Transfers					
16	con	nin 1 year before you filed for bankruptcy sulted about seeking bankruptcy or prep ude any attorneys, bankruptcy petition p	paring a l	pankruptcy petition?			ou
		No.					
	,	Yes. Fill in the details					
	F	Party Contact Info		Description and value of	any property transferred	Date payment or transfer	Amount of payment
		Geraci Law L.L.C.	_				\$1,000.00
		55 E. Monroe Street #3400	_				
		Chicago,IL 60603	_				
			-				

Case 17-36395 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Doc 1

Document Page 48 of 66 Michaela Mills Case Number (if known) _

Last Name

	Party Contact Info	Description and value of a	any property transferred	Date paym or transfer	
	Hananwill Credit Counseling	Credit Counseling Services		2017	\$25.00
	115 N. Cross St.				_ `
	Robinson, IL 62454				
	. 102				
17	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that	s or to make payments to your cree		fer any property to any	one who
	No.				
	Yes. Fill in the details.				
18	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers Do not include gifts and transfers that you ha	isiness or financial affairs? made as security (such as the gra	nting of a security intere		
	No. Yes. Fill in the details for each gift.				
19	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pr		o a self-settled trust or s	imilar device of which	you are a
	No.	otection devices.			
	Yes. Fill in the details for each gift.				
P.	art 8: List Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Stor	age Units		
20	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	r other financial accounts; certifica	tes of deposit; shares in	-	
	■ No. ☐ Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance before
			instrument	closed, sold, moved, or transferred	closing or transfer
21	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for bankruptcy	, any safe deposit box o	r other depository for s	ecurities,
	No.				
	Yes. Fill in the details.				
		Who else had access to it?	Describe the conter	nts	Do you still have it?
22	Have you stored property in a storage unit o	r place other than your home within	n 1 year before vou filed	for bankruptcy?	nave it:
	No.	-	· •		
	Yes. Fill in the details.				
	_	Who else has or had access to it?	Describe the conter	nts	Do you still have it?
P	art 9: Identify Property You Hold or Control f	or Someone Else			

Debtor 1

First Name

Middle Name

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 49 of 66

Michaela Mills Case Number (if known) Debtor 1 First Name Middle Name Last Name Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No. Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Date of notice Environmental law, if you know it 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Court or agency Nature of the case Status of the case Give Details About Your Business or Connections to Any Business 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Mills Coaching Describe the nature of the business Employer Identification number Do not include Social Security number or 6321 N. Oakley Ave Chicago, IL Reiki Practitioner 60659 EIN: N/A Name of accountant or bookkeeper Dates business existed N/A 2010 - present

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 50 of 66

First Name Middle Name Last Name 28 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.	
institutions, creditors, or other parties.	
No.	
Yes. Fill in the details.	
Date issued	
Part 12: Sign Below	
in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
X /s/ Michaela Mills Signature of Debtor 1 Signature of Debtor 2	
Signature of Debtor 1 Signature of Debtor 2	
Date 12/05/2017 Date	
Date 12/05/2017 Date	
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	
Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form	n 119)

Fill in this i	Caso 17 26205 Dinformation to identify your case:	oc 1	17 Entered 12/07/17 15:34:36 1 of 66	Desc Main
D.1. 4	Michaela	Mills		
Debtor 1	First Name Middle Nam			
Debtor 2				
(Spouse, if filing)	First Name Middle Nam	ne Last Name		
United States	s Bankruptcy Court for the : <u>NORTHERN</u>			
Case Numbe (If known)	er	(State)		Check if this is an amended filing
Official F	orm 108			
Stateme	nt of Intention for Inc	dividuals Filing U	nder Chapter 7	12/1
■ creditors har ■ you have lea You must file t whichever is e If two married Both debtors r Be as complete	arlier, unless the court extends the ti people are filing together in a joint ca nust sign and date the form.	or has not expired. s after you file your bankruptc me for cause. You must also s ase, both are equally responsil pace is needed, attach a separ	ey petition or by the date set for the meeting of credit send copies to the creditors and lessors you list. ble for supplying correct information. rate sheet to this form. On the top of any additional p	
1. For any cre	=	nedule D: Creditors Who Have	Claims Secured by Property (Official Form 106D), fi	II in the
informatio	1 below.			
Identify the	ecreditor and the property that is coll		o you intend to do with the property that s a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	3	■ S	Surrender the property	□ No
name:	Wells Fargo Dealer SVC	🗆 R	Retain the property and redeem it	Yes
Description	on of 2006 Chrysler Town & Count	ry with over	Retain the property and enter into a	_
property	108,000 miles		Reaffirmation Agreement.	
securing	debt:	□ R _	Retain the property and [explain]:	_
Creditor's	3	s	Surrender the property	□ No
name:		🗌 R	Retain the property and redeem it	Yes
Description	on of	☐ R	Retain the property and enter into a	_
property			Reaffirmation Agreement.	
securing	debt:	□ R _	Retain the property and [explain]:	_
Creditor's	3	s	Surrender the property	☐ No
name:		🗌 R	Retain the property and redeem it	Yes
Description	on of	-	Retain the property and enter into a	
property			Reaffirmation Agreement.	
securing	debt:	☐ R _	Retain the property and [explain]:	_
Creditor's	3	s	Surrender the property	□ No
name:		🗆 R	Retain the property and redeem it	Yes
Descripti	on of	 -	Retain the property and enter into a	- -
property			Reaffirmation Agreement.	
securing	debt:	R	Retain the property and [explain]:	

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 52 of 66 Mumber (if known)

ist	Your	Unexpired	Personal	Property	Leases

List Your Unexpired Personal Property Leases						
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Office	cial Form 106G),					
fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period	fill in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet					
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).						
Describe your unexpired personal property leases	Will the lease be assumed?					
Lessor's name:	□ No					
Description of leased property:	Yes					
Lessor's name:	□ No					
Description of leased property:	Yes					
Lessor's name:	□No					
Description of leased property:	Yes					
Lessor's name:	□No					
Description of leased property:	□Yes					
Lessor's name:	No					
Description of leased property:	□Yes					
Lessor's name:	□ No					
Description of leased property:	□Yes					
Lessor's name:	□ No					
Description of leased property:	Yes					
Part 3: Sign Below						
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.	l any					
★ /s/ Michaela Mills Signature of Debtor 1 Signature of Debtor 2						
Date Dated: 12/05/2017						

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 53 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In 1	re								
Mic	chaela Mill	s / Debtor					Case No:		
							Chapter:	Chapter 7	
			DIS	CLOSURE OF CO	OMPENSATION	OF ATTORNEY	FOR DEF	RTOR	
	npensation p	oaid to me v	§ 329(a) and I vithin one year	Fed. Bankr. P. 2016 before the filing o	6(b), I certify that f the petition in ba	I am the attorney for ankruptcy, or agreed a connection with the	or the aboved to be paid	ve named debtor(d to me, for serv	ices
	For legal	services, I h	ave agreed to	accept	\$1,000.00				
	Prior to th	ne filing of t	his statement I	have received	\$1,000.00				
	Balance I	Due			\$0.00				
2.	The source	e of the con	npensation paid	I to me was:					
	Deb	otor(s)	Other:	(specify)					
3.	The source	e of comper	sation to be pa	id to me is:					
	De	btor(s)	Other:	(specify)					
4.	I hav	. ,			npensation with a	ny other person unl	less they ar	re members and a	associates
		y law firm.				er person or person e names of the peop			
5.	In return for case, inclu		e-disclosed fee	, I have agreed to r	ender legal servic	e for all aspects of t	the bankru	ptcy	
	-		ebtor' s financi	al situation, and re	endering advice to	the debtor in determ	mining wh	ether to file a pe	tition in
		ruptcy;	~1·			1 1 11 1	1	. 1	
	b. Prepa	iration and	ning of any pe	ution, schedules, s	tatements of affai	rs and plan which n	nay be requ	uirea;	
6.			e debtor(s), the		ee does not includ	le the following ser	vice:		
					CERTIFICATION				1
			-			y agreement or arra kruptcy proceeding	_	or	
		Date:	12/07/2017		/s/ David Kosl	k			
		Date			Signature of A	torney	_		
					Geraci Law L	.L.C.			

Page 1 of 1 Record # 755285

Name of law firm

Headquarters: 55 E. Monroe Street, #3400 Gicagon Leono Beaggas 57070f GRENT CORNER WWW.INFOTAPES.COM

Consultation Attorney: DKO

Record #: 755-285

Date: 11/15/2017



Retainer Agreement Chapter 7 - Pre-filing

Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree debit only, a flat fee for services before filing in court of \$\frac{1,000.00}{2,1000.00}\$ at \$\frac{1}{2}\$ \frac{1}{2}\$ box \$\frac{1}{2}\$ box \$\frac{1}{	ee to pay, b
Starting (Latting Starting) Starting S	
WILDIN OU GAVS OF TOGAY Bankruptcy is time concitivel may now more than this	unt to me was
post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will start preparing your document you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in	
amount, unless you pay us for it in advance.	
After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335. Your flat fee for services afte	r case filing i
\$895.00 . We will present you with an agreement to repay the \$335 we will advance after filing, and for our service through Discharge or case closing without discharge, (at which time our representation of you ceases) totalling \$1.230.00	es after filing
not you sign a post-ining agreement is entirely voluntary; volusing not required to retain Geraci Law for noct blook runtoy consists	. 1A7. 10r
The transfer of non-payment if you decide not to sign a post-filling agreement reimburge the \$335 we paid for you arrive a life of the contract of the payment in the contract of the contract	11 - 444 1
mosting of creditors and periorin ministerial tasks, but you may have to retain someone else for anything not included in the	ost-filing fee
(read next paragraph for what is included)	
The flat fee for pre-filling work pays for: consultation after hiring us, (before retaining us is free) preparation petition, phone calls, emails, very processing and reviewing documents that we requested from your including forces.	veh mossogos
Francisco de la contrata del la contrata de la contrata del la contrata de la contrata del la contrata de la contrata del la contra	
and sign your petition; filing your case in court. Excluded: appearance in any court or proceeding; taking calls from your creditors or bill codecide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: 1 meetings; amendments to schedules; education and after we file your case in court, all work until case closing is included except: 1	
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someone maker including but not inflice to objections to exemptions, motions to dismiss, aftending rule 2004 examinations; reviewing dec	
and not specifically request from you, appearance other than pankripticy court. With "flat fee" rather than hourly you know in advance	
unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become comment and are deposited into our experting assessment and are deposited into our experting assessment and are deposited into our experting assessment.	
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retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter	7.
Termination. If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign	my notition
according to this schedule, I duled that delact law may discontinue work and charge me for the work done to dete at be well	
above. The will offin totally less flot earlied. Wisconsin: We will submit any unresolved dispute about the fee to binding a live of the line of the l	
receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide the dispute to be submitted to binding arbitration, you must provide the dispute to Geraci Law within 30 days of the mailing of the accounting the dispute to be submitted to binding arbitration, you must provide the dispute to Geraci Law within 30 days of the mailing of the accounting the dispute to be submitted to binding arbitration, you must provide the dispute to geraci Law within 30 days of the accounting the dispute to be submitted to binding arbitration.	
or are dispute to Ocider Law within 50 days of the midling of the accounting. If we are inable to resolve the dispute to the esticionation of your	written notice
and the dispute from the cheft, we shall submit the dispute to binding arbitration	
Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excess	ive work; that
more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firm circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a lim	3". Change in
property. The onapter to it you have property not diagnifed as exempt, or risk filth over "non-exempt" property to a Truston Me guarantee.	- £ PS! 1
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AND TO MAKE SURE THAT IT IS COMPLETE AND CORRECT.	
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te: 1/15/17 x	
Michaela Mills (Debtor) (Joint Debtor)	_
Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 171110	
Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 171110	

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Page 55 of 66 Document

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Michaela Mills / Debtor	Bankruptcy Docket #:
	Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

/s/ Michaela Mills X Date & Sign Dated: 12/05/2017

Michaela Mills

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 755285 Page 1 of 2 Record #

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main

Form B 201A. Notice to Consumer Debtor(s)

Document In re Michaela

Page 57 of 66

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 12/05/2017	757 WIICHaela Willis	
	Michaela Mills	
Dated: 12/07/2017	/s/ David Kosk	
	Attorney: David Kosk	

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 58 of 66

Acres These Questions for Repeting Purposes 10. Minal kind of debts do you have? 10. Are your debts primarily on primarily on personal, family, or tousehold purpose. 10. Are your debts primarily business debts? Consumer debts are debts for tousehold purpose. 10. Are your debts primarily business debts? Business debts are debts for tousehold purpose. 10. Are your debts primarily business debts? Business debts are debts for tousehold purpose. 10. Co to line 16. 10. Co to line	Debto	1 Michaela	Mills	Case Nur	nber (if known)	
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For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2		-	es	☐ \$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion	
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. 1017	۴		Signature of Debtor 1		Signature of Debtor 2	
Executed on : 1011 / 1/2017 Executed on			/ la.	5 10047		
MM / DD / YYYY MM / DD / YYYY			Executed on : 10\ / MM / D		Executed onMM / DD / YYYY	

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 59 of 66

Debtor 1	Michaela	Mills	Case Number	(if known)
	First Name	Middle Name Last Nam	18	
Part 6:	Answer These Question	s for Reporting Purposes		
	/hat kind of debts do ou have?	as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari money for a business or in No. Go to line 16c. Yes. Go to line 17.	ily consumer debts? Consumer debts are of the primarily for a personal, family, or household illustrates are debts? Business debts are debts are debts are debts. The primarily business debts are debts are debts. The primary business debts are debts are debts. The primary business debts are not consumer debts or business.	ld purpose." bits that you incurred to obtain ness or investment.
Ch Do an ex ad are av	re you filing under hapter 7? o you estimate that after my exempt property is coluded and diministrative expenses re paid that funds will be vailable for distribution unsecured creditors?		Chapter 7. Go to line 18. apter 7. Do you estimate that after any exempt uses are paid that funds will be available to dist	
yo	ow many creditors do ou estimate that you we?	■ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
es	ow much do you stimate your assets to e worth?	■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion
es	ow much do you stimate your liabilities be?	☐ \$0-\$50,000 ☐ \$50,001-\$100,000 圖 \$100,001-\$500,000 ☐ \$500,001-\$1 million	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
Part 7:	Sign Bolow		and the second s	
For you		correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7. If no attorney represents me and this document, I have obtained at I request relief in accordance with I understand making a false state.	Sign	ble, under Chapter 7, 11,12, or 13 apter, and I choose to proceed s not an attorney to help me fill out 12(b). specified in this petition. ey or property by fraud in connection

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 60 of 66

eclara(tion About an Individual	Debtor's Schedules	
	orm 106 Dec		
	•		
(If known)			amended filling
United States Case Number	Bankruptcy Court for the : <u>NORTHERN</u> District	of <u>ILLINOIS</u> (State)	Check if this is an
(Spouse, If filing)	First Namo Middlo Name	Last Namo	
Debtor 2			
Debtor 1	Michaela First Name Middle Name	Mills Lost Name	

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under namely, of parium, I declare that I have read the	summary and schedules filed with this declaration and that they are true and
correct.	
* MARAM **	x
Signature of Debtor 1	Signature of Debtor 2
Date : 12,5 /2017 MM / DD / YYYY	DateMM / DD / YYYY

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 61 of 66

Debtor 1	Michaela		Mills	Case Number (if known)				
	First Name	Middle Name	Last Name	THE RESIDENCE OF THE PROPERTY				
28 Wi ins	thin 2 years before y	ou filed for bankruptcy, did or other parties.	you give a financial statement	to anyone about your business? Include all financial				
	No.							
	Yes. Fill in the detai	ls. Džiels	sted					
Part 1	21 Sign Below	Control Control	देशके (स्विधन को विकास का के दिन के प्रे					
ans in c	I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
A CONTRACTOR AND A CONT	Signature of Debto	MA -	∭ Signature o	Debtor 2				
	Date 12 /5	/2017 YYYY	Date	/ DD / YYYY				
Did	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?							
	No Yes							
Dld	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?							
f notice	No Yes. Name of perso	on		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
3								

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 62 of 66

Mills Case Number (if known) Michaela Debtor 1 Middle Name Last Name First Name List Your Unexpired Personal Property Leases Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases □ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: □No Lessor's name: □Yes Description of leased property: □No Lessor's name: ☐Yes Description of leased property: □No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 2 Signature of Debtor Date Dated: Date MM / DD / YYYY

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 63 of 66

DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if two have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PENTION IS ACCURATE!!!

Dated: 12 / 2017

Michaela Mills

X Date & Sign

Record # 755285 Asset Disclosure Page 1 of 1

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 64 of 66

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Michaela Mills / Debtor	Bankruptcy Docket #:					
Wilding in the control of the contro	Judge:					

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 3/5/2017

Michaela Mills

Case 17-36395 Doc 1 Filed 12/07/17 Entered 12/07/17 15:34:36 Desc Main Document Page 65 of 66

De	btor 1	Michaela	Mill	s	Cas	e Number (if k	nown)					A
,		First Name	Middle Name Last	Name								
					Del	umn.A otor 1		Column Debtor non-fill	2 or	ise		
Q	Linon	volovment ce	ompensation		\$	0.00		\$	0.00			
ο.			nount if you contend that the amount recei	ved was a benefit	<u> </u>							

	-											
	_											
9.	Pens bene	ion or retire fit under the S	ment income. Do not include any amount Social Security Act	received that was a	\$	0.00		\$	0.00			
10	Do no	ot include any victim of a wa	other sources not listed above. Specify to benefits received under the Social Securi or crime, a crime against humanity, or internate, sary, list other sources on a separate page	ity Act or payments received national or domestic								
	10a				\$	0.00		\$	0.00			
	10b				\$	0.00		\$	0.00			
	10c. 7	Total amounts	from separate pages, if any.		\$	0.00		\$	0.00			
11	. Calcı colun	u late your to nn. Then add	tal current monthly income. Add lines 2 the total for Column A to the total for Column	through 10 for each mn B	\$	3,855.78	+	\$	0.00	= [\$ 3,8	355.78
	art 2:	Determ	ine Whether the Means Test Appli	es to You								
12	. Calc	ulate your cu	rrent monthly income for the year. Follo	ow these steps:								
	12a.	Copy your to	otal current monthly income from line 11	4147240004834444404459777	**********	Сору	/ line	11 here	12a.	\$		55.78
		Multiply by 1	2 (the number of months in a year).								x 12	
	12b.	The result is	your annual income for this part of the for	m.					12b.	\$	46,2	69.36
13	. Calc	ulate the me	dian family income that applies to you	Follow these steps:								
	Fill in	the state in v	vhich you live.	ĪL								
			of people in your household.	3								
	To fir	nd a list of app	amily income for your state and size of ho blicable median income amounts, go online s form. This list may also be available at the	e using the link specified in the	ne sepa	arate		***************************************	13.	\$	78,5	59.00
14	. How	do the lines	compare?									
	14a. [Line 12b is Go to Part	s less than or equal to line 13. On the top $\mathfrak c$ 3.	of page 1, check box 1, There	e is no	presumption	of at	ouse.				
	14b. [s more than line 13. On the top of page 1, o 3 and fill out Form 122A-2.	check box 2, <i>The presumptio</i>	n of ab	ouse is deten	mine	d by Forn	n 122A-2	<u>.</u>		
F	art 3:	Sign Be	low			and the second	omeninty, co.		a a december of the second	10114-1		#16:21 12-15:22:22:22:23
		By signing h	ere, I declare under penalty of perjury that	the information on this state	ment a	nd in any att	achm	ents is tr	ue and o	orrec	t.	
			Michaela Mills									
		Date:	<u> </u>	·								
		If you check	ed line 14a, do NOT fill out or file Form 122	2A-2.								
		If you check	ed line 14b, fill out Form 122A-2 and file it	with this form								

Form B 201A, Notice to Consumer Debtor(s)

In re Michaela Mills / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Michaela Mills

X Date & Sign

Dated: ___/_/_/2017

Attorney: David Kosk